

Michael Roesslein:

We are live with Rebel Health Spotlight, and this is going to be fun, because I'm at the end of a day and I'm tired. She's at the beginning of the day, tired, and we're going to be loopy and silly and fun together. This is my friend, Brie, who we've had on a lot of times before with various things for... I think we did podcasts, we've done another interview, we've done a webinar or something along the lines somewhere at some point. We did a webinar during COVID. I did a series about COVID.

Brie Wieselmann:

Yeah, I told my wife-

Michael Roesslein:

We did a webinar. I did tons of webinars during COVID, and you were one of those. I don't remember what we talked about, but I think it was maybe about not going crazy during a pandemic, which we were probably crazy while we were doing it. But yeah. I want you to just briefly let everybody know who you are and what you do, and then we're going to dive into some interesting conversation around your work and the model that you're now working in and who knows where that's going to go from there.

Brie Wieselmann:

Yeah. Okay. I'm Brie Wieselmann. Who I am in medicine? Basically, that part of my journey is that I've been in some form of health practice since 2001. First, informally as a Western and Ayurvedic herbalist, which was my first point of education. That came from playing with plant medicines that were psychotropic as a kid, and that leading me to go like, "Hey, wow, we have receptor sites for these things in our body. What do other plants do?? And so, that began a long journey. It was first plant medicines, and then that took me to Chinese medicine school to further my education in the plants, but also learned needles and Chinese therapeutics and that whole system of medicine, which along the lines, I ran into teachers who were integrating Western and Eastern medicine. They were my main mentors who I apprenticed.

At the time, it wasn't called functional medicine. We just followed Jeff Bland around every time Metagenics came to town, and then Datis Kharrazian, and then eventually somebody called it functional medicine and there we were. But it was around that time that I started kind of jumping on that bandwagon and perceiving that system as really just Chinese medicine and English word clothing. Yeah, I've always dabbled in models of holism. And then here I am, 20 something years later, in practice. Practice before has looked like brick and mortar, worked in live patient care one-on-one. A lot of work in fertility and hep C along the way and gut health when I transitioned online in 2012, and have seen thousands of patients in the online space since then, and still doing that but just in newer and different shapes.

Michael Roesslein:

Yeah. You've had a lot of transitions in the last year or two. You moved, your life kind of changed quite a bit. In your professional practice, you mentioned you've seen thousands of patients, worked predominantly in fertility, gut health. Did you say hep C?

Brie Wieselmann:

Yeah. I did a lot of work in harm reduction centers for people who were [inaudible 00:03:17] more healthfully while using substance support coming off of them, initially when I was an herbalist. I got really interested in the population of people with HIV and hep C, and at the time it wasn't curable. There was a recognition that Chinese medicine was instrumental to the success outcomes of people undergoing interferon or [inaudible

00:03:35] at the time. And so, I worked with that population exclusively for the first three years of practice, but it was hard. It was a hard time.

Michael Roesslein:

That's an intense environment.

Brie Wieselmann:

Well, back then, people were dying from it. Not always, but-

Michael Roesslein:

No, but that's an intense environment, an intense setting.

Brie Wieselmann:

[inaudible 00:03:55] the news early.

Michael Roesslein:

People are really sick and people are dying. Yeah. You jumped right into the deep end of the pool then. I wasn't sure you said hep C. That's one that nobody's ever said on any interview or podcast I've ever done. I was like, "Did she just say hepatitis?" That's not a normal niche amongst practitioners.

Brie Wieselmann:

It is. Yeah, that's another story for another day, but yeah.

Michael Roesslein:

Okay. Now though, and I guess this does correlate to fertility and gut health, but your forward-facing focus or niche or topic or patient avatar is, I'm going to use marketing words, is perimenopause.

Brie Wieselmann:

It is. Perimenopause.

Michael Roesslein:

Which you can tie in fertility, hormones, gut health, all those things. You're just taking what is like a bing, bing, bing, bing, bing, bing, and putting it here because there's a lot of women that need help in that department. Was it a frustration with a lack of options that exist or a really passionate desire to work with that topic? Where did the little light bulb go off in your head like, "You know what? I'm going to shift and I'm going to work with perimenopausal women"?

Brie Wieselmann:

Well, there's a couple things. Some of them professional needs and some of them personal, and I'll just mention all those. One of them is I'm 45, and I get stopped all the time-

Michael Roesslein:

Are you?

Brie Wieselman:

Yeah. People ask me, "What are you doing?" Because when they meet me and I tell them eventually, not like, "Hi, I'm Brie. I'm 45." But eventually, they're like, "I really thought you were maybe 33." They're like, "Okay. What are you doing?" There was that. Okay. The other personal thing is not the like, "Oh, let me brag about that," because that's obnoxious. But the other thing is that, yeah, I did IVF, I'm a woman living with PCOS. I had IVF and gave birth at 40 while running a company with a lot of employees and people helping me make the business happen and a lot of clients to manage.

When my kid was three, went through a divorce and moved states away from my very rich and deep community of 24 years in the Bay Area. There was just a profound amount of change, and I needed a change in terms of how I was going to make all the pieces work. Simultaneously, to the context of post-pandemic world, I saw a need for healthcare the way I was delivering healthcare to change in terms of how is this going to be fulfilling to me so that I have the excitement to keep going. How am I going to keep this alive, and how does my genius want to come through? Also, how am I going to best serve people? Also, I'm perimenopausal and perimenopause, people don't really get it. They're like, "Well, I'm not hot flashing yet and having vaginal dryness." I'm like, "Whoa, girl, this starts 15 years prior. Let's just have that conversation."

There's all these changes long before people are having hot flashes and all that. They're having poor stress resilience, and they're having anxiety, and their sleep is starting to go, and their weight is starting to crawl up, and something's not quite wrong but something's not quite right. My main driver is... Candidly, this is all humans, but for me, I'm just going to pick this doorway. When women are happy and fulfilled and are living a life where they're oriented towards pleasure, and I mean pleasure in both a healthy selfish way, but also pleasure like I'm expressing and actualizing who I am, I actively seeking joy in my life and I'm choosing who I'm surrounded by and what experience I want to have and my life has meaning, then everything they touch turns to gold.

How do I best create a better world or the world I want to see? By helping those people do that. That's my secret mission. My not so secret mission looks like, "Yes, let's balance your hormones and get you not gaining weight and having the energy you want." But that's the details of what drives people to seek a solution. But my secret mission is get these women joyful and activated, so that they go out in the world and do whatever they're here to do and enjoy it. The group thing-

Michael Roesslein:

I love the secret mission, forward-facing mission, and I know it's the thing, it's the bait.

Brie Wieselman:

Exactly.

Michael Roesslein:

Let's give people what they need, not what they want. What they want might be the I need my hormones fixed, I need to not have hot flashes, I need to not lose my hair. I am not a perimenopausal pro, so I don't even know what all the symptoms are. I just ran out of my list, but they'll come because they don't want that. They don't realize that in order to not have that, they're also going to gain a lot of life back. That maybe is the absence of that is the reason they have those things they don't want in the first place.

Brie Wieselman:

Exactly. Those symptoms are just a compass pointing us towards where we need to go. Our body's always just giving us messages. They can't text us and say, "Hey, here's what I need by the..." I mean, maybe with AI, we'll go that way, but-

Michael Roesslein:

I'm Gen Z. Right there, you just said there was a time where people that can't text.

Brie Wieselman:

Right? Anyway, our body's telling us what we need to do, but the same things, to your point, the same things we do to make a body hospitable to a baby. The same things we do to enhance fertility are kind of the same things we do to enhance how we feel in this perimenopause window, which are actually the same things we do in the decades to follow to my other secret mission, is enhance longevity.

What does that mean? It doesn't mean we get to take over how many numbers of years we're here necessarily, but we can influence how well we feel and how our play span and well span and creator span and all of the connectivity we have. That's all the same work, and it is founded in these underlying physiology, body systems. Because when those are relatively functioning, we carve out bandwidth for doing the healing work of trauma, or changing the thing that's not working in our life, or going in a direction that we do want.

Michael Roesslein:

Yeah. But if your foundation is a mass and your physiology is a mass, it's really, really difficult to find the capacity to do that, then you have a chicken egg situation of how do I get out of this...

Brie Wieselman:

Yeah. How do we do it?

Michael Roesslein:

How do I get out of this mess? It's setting a more solid foundation. I guess it's pushing off solid ground versus pushing off sand.

Brie Wieselman:

Yeah. Fill the cracks of the vessel so the chi can flow through more in a direction that's net positive-

Michael Roesslein:

Back to Chinese medicine.

Brie Wieselman:

It always comes back to that for me.

Michael Roesslein:

Yeah, yeah. I think we've talked about this. I was super close to going to, there's a school in, I think it's in Los Angeles [inaudible 00:10:42].

Brie Wieselman:

Yeah. [inaudible 00:10:43].

Michael Roesslein:

No, it had a Chinese name to it, but I almost went there, because I had a mind-blowing experience with a doctor in Chicago who was an MD and a Chinese medicine doctor. I sat with her for 90 minutes once, and she pulled out the thing that has the elements on it and had looked at my medical history and my tests and my symptoms, and then proceeded to spend a half hour telling me about myself. At the end of it, I was like, "What the hell just happened?" Because she was using like, "Well, your wood and your liver means this. You have an issue with anger, but that's why you drink, and the drinking hurts this thing and this happens." And then I was like, "Holy shit."

It wasn't this moment where I'm like, "Oh, I need to do all these things for myself." It was I need to learn how to do that. I jumped straight to I want to know that. I want to learn how to do that. So then I was going to go, but then there's needles and I'm terrified of needles and I never got over it. My needle phobia is the reason I never became a Chinese medicine person.

Brie Wieselmann:

That's funny. Now, here you are doing [inaudible 00:11:48] work in qigong. I mean, it finds you anyway.

Michael Roesslein:

Yeah, and I have a lot of tattoos.

Brie Wieselmann:

There was just something there for you. Not needles.

Michael Roesslein:

Yeah, yeah. There was something there for me, and I got the thing I needed and I didn't need the whole pie. So, the perimenopause symptoms and the desire to feel better is the doorway to get them to come to do the things that fix that happen to also change the way that they're going to live and enjoy and experience the rest of your life. I like that you mentioned... I always hear health span, but you had a few other ones that you shared there, like creative...

Brie Wieselmann:

Creative span and play span.

Michael Roesslein:

Creative span. Because moving to Italy, one of the first things we noticed when we got here was the amount of people who are very elderly, who are out and about. The town that we lived in first, now I live in Lucca and it's flat, relatively flat. But when we got here and we lived in Montepulciano, it's like a 45 degree angle, all the streets there. Everything is like this. There were-

Brie Wieselmann:

I walk to school both ways uphill. Really is rural there.

Michael Roesslein:

Yes. There were very elderly people. I'm talking in their 90s or above, who you'd see walking to the grocery store, walking up the hill, going to these places, out and about at restaurants. We see them getting gelato.

That's another thing we've noticed is very elderly people are always at the gelato shops eating gelato, and that you don't see any of that in most of the places in the US. 90 plus year olds, out and about, on their own, independent living alone, doing things that they enjoy. A lot of people, if we make it to that age in the States, you're in a home, you're sick, you're on 17 medications. I like that you pointed out with longevity that it's not the number of years. The number of years is great, but what can you do in those years?

Brie Wieselman:

There's something else I want to mention that you just pointed out. You just said, "I moved to Europe, I moved to Italy, and we see people out in the streets doing whatever, biking, walking to the place." There's part of it [inaudible 00:13:50]. We can reduce that to movement. But here's the other thing. I was just spent about two weeks in Spain, and I saw some family of mine in [inaudible 00:13:58]. I was in Barcelona. I went to Lisboa and did a dance conference.

One of the things that having not been there in a while struck me was every city and town, there's a promenade. It's [inaudible 00:14:09], or it's wherever. There's different places you can name and multiple of them in cities, but people are out and you see the 90-year-old and the two-year-olds together. And so, I think that is also something. I've largely grown up in the US as a first generation person, but one of the things that you don't see as much are these... I guess we have outdoor malls or something, but it's different. It's just not that same vibe of this has been here forever and this is part of how we do.

There's a thing about the togetherness, and we were dancing on this and I wanted to... That was another big shift for my practice. Some of it is this calling back to something I knew to be true. You know how when we're 18 and 19 and we just think we are all that and we know what's up and we are going to run the world? Well, there's some value, even though we're a little bit... It's like the pure confidence you have to have that's a little crazy as a business owner, because you're like, "Oh, I'm going to make this crazy thing happen and I have to believe in it wholesale, or else it's not going to work." It's like that. There's some things we do actually know at that age that maybe are going to take a while to actualize.

But one of the things for me was this idea of togetherness in groups and wellbeing that came full center for me. Some of that happened through insights I had really in some of my early psychedelic journeys. I was at this concert, I was at a Phish show. I was at a Phish show when I was 16 on a lot of something. I decided to depart from the people I had been kind of cohorting and hanging with, not because I didn't like them, but just I wanted to go have my own experience. I wandered off and I would do this. I would make new friends and get here we go. I had accumulated a bubble of people and we went over to-

Michael Roesslein:

We would both wander off and make new friends, people. That's how we even know each other.

Brie Wieselman:

Yeah, that's how we met. We go to this drum circle, and I'm hanging out with these new friends and we just start dancing. The conversation just got so much richer. This was before I knew that dancer is one of my key personas in life that heals me. I was like, "Oh, this has to do with drums and rhythm, and we're all connecting to this." It was like... Okay, neural connections were made. So then, I moved to the West Coast and I started looking into, at the time, this idea of dance therapy and predecessors to Martha Graham, and Naropa Institute had a program.

I had thought about this because what it was being used for in practice in modern day was largely people who were either nonverbal or severe schizophrenic. This idea that when we could just even get people to be around a pulse and clap on a pulse or tap on something, that that in and of itself was resonant and healing because

they suddenly remembered how to feel that they weren't in isolation. They were part of something. If you look back, tribally, this was something we did. Every group had some form of this. We are going to have drums or whatever, and that is the heartbeat. That is...

Michael Roesslein:

They would return to that circle when there was a loss, when there was somebody suffering, when somebody was sick, when somebody needed support.

Brie Wieselmann:

Marriage, a harvest of-

Michael Roesslein:

Yeah. Celebrations.

Brie Wieselmann:

... [inaudible 00:17:29]. Also at the same time, I got interested in how psychedelics were healing medicine, which was way before its time. Now, that's actually a thing and hallelujah, but I was very interested in ayahuasca in its traditions because it was a medicine that was traditionally used as a healing agent and with intention in that way. Part of the way that at least not the Santo Daime, but some of the tribal predecessors to that group, used it... The idea was when someone... There wasn't a lot of social deviance. There wasn't theft and violent crime and things in these societies as much, because when they saw that someone was off track in some way, they would have this ceremony and give them medicine and sit with them. We put people in prisons and say, "Go away, you're bad." That's a whole nother. But they understood innately, this person got disconnected and they need to be reconnected. How do we reconnect them? Because when they feel like they're part of me and I'm part of them, they're not going to act in ways that are-

Michael Roesslein:

And they didn't use shame.

Brie Wieselmann:

Yes, no shame, not harmful.

Michael Roesslein:

Our prison system uses shame, and so does our parenting style in the US. How many people listening right now, like myself, were go-to-your-room kids.

Brie Wieselmann:

Go to your room, go away, be by yourself. Yeah.

Michael Roesslein:

Yeah. And think about what you did.

Brie Wieselmann:

Think about... Because that always helps.

Michael Roesslein:

Yeah, yeah, yeah. Because you're five, and you have an ability to figure out what you just did.

Brie Wieselmann:

Do that. Yeah. So, groups [inaudible 00:18:55]

Michael Roesslein:

So, inviting them into the group and being like, if they're acting in this way, it's because they feel that they aren't part of the group or that they've become disconnected from the group. Now, you have taken this Phish show, drum circle, ayahuasca traditional idea, and you've shifted your practice from predominantly working with individuals to predominantly working with groups. Yeah.

Brie Wieselmann:

Groups, small cohorts. I mean, on a very practical level, I also realized that working with someone once every four to eight weeks for even an hour, I can't deliver the education that gives them the true empowerment in that format effectively. In this way, I'm able to meet with people. They have access to me twice a week in person and every week in a group messaging board type thing. But also, I could give them whole pieces of education that build upon, so that I can teach them a system. Because what I really want is for people to call me when they're 80 and be like, "Remember that stuff I did with you when I was 40? That changed my life. Thanks." Those are systems I use, and I can't deliver that as effectively, A, with one-on-one people.

But the repetition you get in groups and the empowerment of seeing things role modeled and seeing people who are a few steps ahead of you, or telling people who are where you were just a little bit ago like, "Hey, keep going." All of that matters, and we heal better in groups most of the time. There are certain situations in medicine where absolutely you need one-on-one care, but for this stuff that's about the general direction we're going in and the places we have choice and that really are epigenetic lifestyle medicine and its core, that stuff happens when we're together better, faster.

Michael Roesslein:

Yeah, yeah, yeah. No, I dig it. We talked before we went on air that I'm creating a whole new practice slash career slash offering slash whatever I'm going to do with all the training I've been buried in for five years. It's weird to step out of constant student mode into a facilitator. It's nice. It's refreshing. I am in a training. I'm with Francis Weller right now. I think you know who he is.

Brie Wieselmann:

Yeah, yeah.

Michael Roesslein:

[inaudible 00:21:08] on grief. I'm in a five-month training with him on grief and grief rituals. I bring that up because he teaches a ton about the history of human villages and groups and how they've related to grief specifically, but also bringing, it's always the circle, it's always the village, it's always the ritual, it's always the community, it's always held together the most difficult things. It's never in isolation. We were never intended to deal with these things in isolation. We don't have the capacity to do it. If you can't deal on your own all alone, isolated, it's not you, it's the system that we're in that's unhealthy.

But side rant over, I'm also going to be working in small cohorts and groups, because I think that there's a really unique experience to it that is a part of who we are. It's part of how we've... We are wired for connection and for having things mirrored to us, to being accepted, to being part of something. I just got off an interview actually for an online summit that I'm co-hosting for Health Means with Nathan Crane. I don't know if you know who he is, but I just interviewed him. He does integrative cancer. He's made a bunch of movies. He's done a lot of documentaries. Tons of energy, one of the most high energy people I've ever interviewed. It's the only thing that kept me awake for coming on this one. I have a three-month old. This is not to say that I'm bored. I didn't sleep last night, for people who don't know.

He talked about the biochemistry that happens when we see somebody helping somebody else. We get positive biochemistry responses when we help somebody else, but we also get positive biochemistry responses from seeing somebody help somebody else. If you see somebody help an old lady across the street, your own body produces positive biochemistry. In groups, the ability to create that. Say you're in a group and you're talking to one of the people in the group specifically and you're helping her with a specific problem, and then she's super grateful for this help and she has an aha moment and she's going to make this really positive change. Everyone else who's sitting in that group with you has a positive biochemical response to that.

If that is true, that means that we are designed to do that. Why else would there be a reward system built into our physiology if we're not supposed to be in groups helping each other? He brought that up. The idea that the survival of the fittest when it comes to evolution and all these things with humans is not the way. Because if it was, we wouldn't get biochemically rewarded. Our bodies wouldn't give us treats for doing something that helped somebody else. You would push the old person in front of a bus if it was truly survival of the fittest, and then you would feel awesome about it and you'd be like, "One less person to take my food. I'm the champion." But it's the opposite of that. I hope nobody clips that little cut right there.

Brie Wieselmann:

I know, right? Oops.

Michael Roesslein:

That's how the internet works.

Brie Wieselmann:

You should link in to the podcast that when you shove her in front of the bus-

Michael Roesslein:

When you shove the elderly person in front of a bus.

Brie Wieselmann:

Five points.

Michael Roesslein:

That was a lot of unasked for, unsolicited high five to your shift in group space.

Brie Wieselmann:

Tend and befriend. Tend and befriend. Tend and befriend is a stress response in study. If anyone's curious and wants to PubMed, Google Scholar that, what you're talking about is called the tend-and-befriend response. It is observed in all species. It's not the only response to stress is not fight or flight.

Michael Roesslein:

That's just the one that we like to talk about because we love to be terrified all the time. People who tell us what to think about, love us to be terrified all the time. Very cool. Switching to groups, perimenopause is the way and the door to the secret thing of helping women actually live better and feel better and enjoy their life more. I'm curious, where can people find you and how could they explore if... There's a lot of... Joe and I, I don't know, did you ever interview with Joe when I was partnering with Joe on here? Did you ever meet Joe or talk to Joe or anything?

Brie Wieselman:

No, never.

Michael Roesslein:

Well, Joe and I started RHT 10 years ago, soon is 10 years, which is like a thousand in this world. 10 years ago, it's been since we started this, and after the first couple years, we decided to send out a survey that tried to gauge who our audience was, so we could determine what kind of content to produce next, what did they want stuff on. This was almost 10 years ago. It was 70% women. Well, it was 85% women, but it was 70% women that probably fall into the category of your target patients right now. And 45 to 60, or 40 to 60 women who either had a chronic health issue or somebody in their life did, so they were the one that was online trying to figure out how to help the person, because always the woman doing that. The men will go do that if they're literally dying or if there's not another person to help them and nobody's going to do it for them. Sorry, guys. But it was perimenopausal women were our super target and we were, one, shocked, and two, we're like, "What the hell-

Brie Wieselman:

There's reasons for that.

Michael Roesslein:

... do we teach them?" And then Joe's like, "Well, the same stuff we teach anyway is good for them, so we'll just keep teaching the same stuff." It worked. So, our audience here at RHT is largely within your demographics. If they hear you talking and they hear about this and they want to go check it out, tell them where to go and what to do.

Brie Wieselman:

Yeah. You can always reach me through my website, which is just my name dot com, briewieselman.com. It's probably in the show notes. It's hard to spell, but it's there. I'm on Insta regularly, and Facebook page. The link to more information about what the heck this program is about is stayyoungmethod.com and then forward slash register, or just stayyoungmethod.com. It'll get you the same place. But there's a webinar there that can lead to more information about what's actually involved in that. Those are great places to interface with me, but I love chatting with people. DM me, message on my posts. I'll chat with you, all that. It's fun to talk to people.

Michael Roesslein:

Brie's super accessible. Okay, cool. We'll put all those links right below the video. I just wanted, if somebody's listening and they're not on the website or our website right now, to click something. I wanted them to be able to hear it also. We'll put the links there so they can go there, watch that, check it out, reach out, ask questions. Finally, I always put guests on the spot on this series to share a couple of your favorite, either self-care practices or needle movers or things somebody might learn when they walk in the door to one of your groups, just your favorites. That might apply to just about any if it's middle-aged woman at this point.

Brie Wieselman:

Totally. It's funny, I spent, say, \$300,000 on a medical degree to basically learn to tell people the same things I tell my 4-year-old, which is like, "Are you drinking enough water? Eat your veggies and eat protein. Go outside and run around. Go the fuck to sleep. Are we having fun? Let's talk about your emotions." I mean, I'm kind of joking, but I'm kind of not because I sat down with this the other day and wrote out my pillars, and I was like, "Oh my God. Wow. \$300,000 in 25 years of practice [inaudible 00:28:59]." But no. I would say that the biggest needle movers, if I'm uh-uh-uh about things, the rest of it, yes, we have fancy labs and blah, blah, blah and all that, but put on as much muscle as you can in this decade. If you haven't been doing it, it doesn't matter. Go start tomorrow. Just start lifting things that are heavy and keep lifting them heavier-

Michael Roesslein:

Can you just speak to the... I used to be a trainer, and I know that this comes up and I want them to hear it from you, not from me, because I'm a man. Can you calm the panic that happens inside of some women's mind when they hear that they should lift weights or get stronger, that they're going to end up having shoulders like mine within the first two weeks of when they go into the gym?

Brie Wieselman:

Okay. They're not, you can see I'm a pretty petite person. I currently weigh... I'm just going to out this. Okay. I currently weigh roughly 125, give or take a few pounds on any given day, but I weighed 140 after IVF and pregnancy, and I'm 5'3". I'm pretty small. As a perimenopausal woman, I could not get that weight that was hanging on from the hormones I had taken from the IVF and the pregnancy and the pandemic until I started lifting heavy things. What happens is that when you do it appropriately paired with, and I'm going to say my second tip in a second, then what happens is your body switches composition.

Get away from numbers on the scale. I weighed 120 in high school. Yeah, I had no muscle mass, but it's about having more lean mass and the fat mass shrinks. What happens is what you see changing is how you fit in your jeans or your clothes. It takes a very intentional, it takes certain hormones, and it takes a very certain diet to put on bulk like that, so it's not going to happen. If it is, there's ways to just tweak a few things so that that's not-

Michael Roesslein:

But you're not lifting for two hours a day and taking-

Brie Wieselman:

No.

Michael Roesslein:

... all kinds of stuff like that. Yeah, that's not going to happen.

Brie Wieselman:

It's really hard to bulk up actually. Yes, it's not going to happen. We're talking about a realistic amount of two to four times a week for half hour to an hour or whatever it is that it fits in your world. Maybe you start small. If you're starting off the couch, please do not go crazy thinking you have to jump from zero to 100.

Michael Roesslein:

Maybe [inaudible 00:31:15] workout.

Brie Wieselman:

No, please. Oh my God, no. But I will say that when I'm doing leg presses, I'm doing 260. I'm a little person, and so my legs are not tree trunks. Don't freak out about it. There's ways to do it. Get some help, have someone help you structure and tell you what to do.

Michael Roesslein:

Lift heavy things, put on muscle is [inaudible 00:31:35]. What were you going to say to combine that with?

Brie Wieselman:

The other paired thing is eat more protein than you think you need, because as we get older, we need to boatload more protein. Keeping our insulin low and stable and staying sensitive to it, meaning not going in the insulin-resistant direction with which as women in perimenopausal hormonal transitions, everything is trying to push us in the direction of insulin resistance. There's evolutionary reasons that that was so, but they don't work in our favor in today's world. And so, we need more protein because that's how we keep and maintain muscle, which is the secret to a long healthy life is how much muscle can you keep and put on, because that's how many mitochondria you have and how well they function. Guess where your insulin receptors are? They're on your muscle. And so, you stay more insulin sensitive and all the rest of the inflammaging and oxidative stress that happens goes down.

You can choose. It's totally in your power to choose. I tell my daughter that... My God, everything goes back to what I tell my 4-year-old. You have the power to choose. You can either go in a direction of cannibalism, your body eating itself and oxidizing and inflammaging, and your immune system dysregulating and making less net energy in your cells. Or you can maintain, or even... It is a total myth that we are just going downhill from here. You can totally improve things. You can reverse your cellular age, you can increase your energy and feel better than you have in the past. Now is this golden window where you can do that. Really at any age.

Michael Roesslein:

Awesome. More protein, heavy things, drink water, eat veggies.

Brie Wieselman:

Find things that... Surround yourself with people who find your joy. You got to do that. We're not doing something different.

Michael Roesslein:

Find the right person. What's the point why I want to be around longer if you're not doing anything fun? I find it very fascinating that I don't know how many of these I recorded, but a bunch. The thing at the end, when I first got into doing this work 10 years ago was when Dan was huge, Kalish, and he was on Sean's things, [inaudible

00:33:46], and then there'd be, Andrea was on all of those too, Nakayama, and who I did an episode of this with. She's really cool. I never met her for a long time. We've just met last year and we've done a couple recordings.

But the trend and bland and the trend was complexity. What lab tests do you know how to run? Do you know how to interpret this? The adrenal profiles, the salivary adrenal profiles, the-

Brie Wieselman:

[inaudible 00:34:14].

Michael Roesslein:

Then out came the organic acids test, and holy shit, is that complex. And then, the Dutch test, because we needed to also make-

Brie Wieselman:

It's my favorite test tough.

Michael Roesslein:

They're great. You can learn tons of stuff.

Brie Wieselman:

Oh my God. Organic acids [inaudible 00:34:24].

Michael Roesslein:

They learn tons of stuff, but it's like a college education to learn how to properly interpret it. And then people want to order these on their own, so then they order them and then the sheet tells them like, "This is out of whack. You have..." So, I would get clients. I haven't worked with health clients one-on-one in five years. When I stopped, I would get clients who would come to me and say, "I have these symptoms. I've seen these five doctors. I want to run these four lab tests. I want to go on a protocol for this. I want this supplements. I want to do this." The complexity was the thing. The more complex you could make it sound what you did, the more people would want to come see you, or the more complexity you could handle.

Now, I find it really ironic, and I'd heard this all the way back then too from Paul Chek, who I studied with at the Chek Institute, who started in fitness but got into holistic health. I think he calls them the five doctors, four doctors. I don't know, but it's been a long time. They were sleep, movement, stress, quiet, and diet. The things were so simple. But then, I was like, "No, I got to do all this complex things, or else, I'm not going to be able to help people." Now, on this series, this is the first time I've noticed this trend really kicking in, is I'm asking everyone to share practices. Probably 90% of the practices that have been shared are a really simple way to change how you breathe, or go outside and touch the ground, or get sunlight in your eyes in the morning, or eat protein or lift heavy things.

It's almost gone this full circle back to things that you would tell a four-year-old, because if those things aren't in order, all of that complex shit isn't going to matter. If somebody wants to run \$10,000 in labs, fine, great. What time do you go to bed, and what's your stress level, and what are you eating? Let's check that out before you drop the bank and find out a whole bunch of-

Brie Wieselman:

\$5,000 supplements.

Michael Roesslein:

At some point, I'm going to make a list of all the recommendations that are coming at the end of these interviews. It's going to feel silly when somebody reads it, because it's going to be the most basic, simple, easy things. But I think that it'll kind of be a slap in the face that like, "Wow, it doesn't have to be this... It's not that hard."

Brie Wieselman:

No, it's not that expensive.

Michael Roesslein:

No. There's a place for that. There's a use for the labs, there's a use for the supplements, there's a use for those things for sure. I'm not trying to throw all that stuff under the bus, but I'm excited to see very, very smart people who know tons of complex stuff come on here and say, "Go outside, do fun things." Because nobody was telling anybody to do that for a long time. It was like, "Eat this super hyper restrictive diet, and take these 19 supplements, and run these 14 lab tests, and do this thing. And then, maybe you'll be healthy. But don't worry about moving or water or smiling or seeing your family."

Brie Wieselman:

Yeah, [inaudible 00:37:56].

Michael Roesslein:

Sorry about that extra rant.

Brie Wieselman:

No, it's great. We were spending a decade and a half, two decades trying to justify this approach to the Western medical world, and it had to look fancy and lab-based. But now, we're like... But also, if people aren't doing this stuff and balancing their blood sugar and blah, blah, blah and touching the earth, then none of the rest of this fancy ass stuff works.

Michael Roesslein:

It doesn't matter.

Brie Wieselman:

Excuse my French.

Michael Roesslein:

It's just very expensive. No, I think the boat went away on the language a while ago on this interview, so it's okay. No, we don't edit it, so it'll be in there. Sorry if we offended anybody.

Brie Wieselman:

I'm not, that's what you get. If you don't like it, I'm not worried.

Michael Roesslein:

Honestly, if they're watching this, they probably are desensitized to it, because it's not the first time in one of my interviews either. That's who I am too. Thank you for doing this and for... I'm not sleepy anymore. That was fun.

Brie Wieselmann:

Thank you.

Michael Roesslein:

I hope this was a fun way to start your day. The links are down below, so go check out Brie and her work and her groups. If you are in that demographic, I think that there's no better place that you could go to find community and find information and education and find support, and really change what you perceive as normal that you're going to have to go through and make it something else that isn't that, because it doesn't have to be that, I don't think.

Brie Wieselmann:

No. Thank you and thanks for having me. It's been a blast. I feel my energy is way better.

Michael Roesslein:

Awesome.